

Department of Public Health and Human Services

Director's Office ◆ PO Box 4210 ◆ Helena, MT 59620 ◆ (406) 444-5622 ◆ Fax: (406) 444-1970 ◆ www.dphhs.mt.gov

Steve Bullock, Governor

Richard H. Opper, Director

December 30, 2015

Dear,

We are pleased to invite comment from all Tribal Chairs, Tribal Presidents, Urban Indian Center Directors and Indian Health Service regarding several Montana Medicaid Waiver and State Plan amendments that the Montana Department of Public Health and Human Services will be submitting for approval to the Centers for Medicare and Medicaid Services on or before January 31, 2016.

On or before December 31, 2015, the Department will submit a Section 1115 Basic Medicaid Waiver amendment with a proposed effective date of February 1, 2016. This amendment will add the Aged, Blind, and Disabled (ABD) population in order to waive the dental treatment services annual cap of \$1,125. Covered services, excluding diagnostic, preventive, denture and anesthesia services for adults age 21 and over are subject to an annual cap of \$1,125 per benefit year. The estimated total annual state and federal impact for the ABD population over the \$1,125 cap of this amendment for State Fiscal Year (SFY) 2016 is \$1,014,445; and \$2,028,889 for SFY 2017.

On or before January 31, 2016, the Department will submit a new Section 1932 Primary and Enhanced Care Case Management Programs State Plan amendment with a proposed effective date of February 1, 2016. The amendment will add the Health and Economic Livelihood Partnership (HELP) Plan new adult population to the state and federal authority for Passport to Health, Health Improvement, Team Care, and the Nurse Line care management programs. The new adult population receiving coverage through the Medicaid State Plan Standard benefit will be eligible for all DPHHS care management programs. The estimated total annual state and federal impact for the new adult population's care management per member per month fees is \$325,866 for SFY 2016 and \$944,664 for SFY 2017.

On or before January 31, 2016, the Department will submit a 1932 Patient Centered Medical Home (PCMH) State Plan amendment to add the HELP Plan population, effective January 1, 2016. These new adults who are exempt from Third Party Administrator (TPA) enrollment, such as medically frail and those who require continuity of coverage that is not available or could not be effectively delivered through the TPA, will receive their healthcare from the Aligned Standard State Plan Alternative Benefit Plan (ABP). This includes the option of having a PCMH. The estimated total annual state and federal impact to add the new adults to the Medicaid State Plan PCMH Program is \$14,400 for State Fiscal Year (SFY) 2016 and \$41,736 for SFY 2017.

The Department is also providing tribal notice of ABP for: (1) the HELP Plan; and (2) the Aligned Standard State Plan. On April 29, 2015, Governor Steve Bullock signed into law Senate Bill 405, an Act establishing the Montana HELP Plan to expand health coverage in Montana to an estimated 70,000 new adults with incomes up to 138 percent of the Federal Poverty Level (FPL). Montana contracted with Blue Cross and Blue Shield of Montana (BCBSMT), a TPA, to administer the delivery of, and payment for, most healthcare services through the TPA ABP for most new adults. Those new adults who are exempt from TPA enrollment, such as medically frail and those who require continuity of coverage that is not available or could not be effectively delivered through the TPA, will receive their healthcare from the Aligned Standard State Plan ABP. Both ABPs include the 10 Essential Health Benefits as required by the Affordable Care Act, which are: ambulatory patient services; emergency services; hospitalization; pregnancy, maternity, and newborn care; mental health and substance use disorder services; prescription drugs; rehabilitative and habilitative services and devices; laboratory services; preventive and wellness services; and pediatric services. Additional benefits include: vision, dental, hearing aids, transportation, Diabetes Prevention Program, prescription drugs, and services at Indian Health Service, Federally Qualified Health Clinics, and Rural Health Clinics. The estimated total annual state and federal impact for the new adult benefits is \$159,896,353.

We invite your comments and questions postmarked by January 27, 2015. You may direct comments to Mary Eve Kulawik, Medicaid State Plan Amendment and Waiver Coordinator, at (406) 444-2584 or mkulawik@mt.gov; or Director's Office, PO Box 4210, Helena, MT 59604-4210. Please let us know if you would like to arrange a date and time to discuss these State Plan Amendments.

Sincerely,

Mary E. Dalton Mary E. Dalton

State Medicaid Director

Cc: Jason Smith, Director, Governor's Office of Indian Affairs

Lesa Evers, Tribal Relations Manager, DPHHS

to Medicaid expansion. None of these changes should have a negative impact on Indian people or Indian Health Service, tribal or Urban Indian Center providers.

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